



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011**

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

|  |             |   |                        |                     |
|--|-------------|---|------------------------|---------------------|
| 1. Corporate ID No.<br>37615   |             | 2. Name of Corporation<br>POOL & PATIO CENTER, INC.                 |                        |                     |
| 3. Street Address Principal Business Office<br>53 Sandy Bottom Road  |             |   | City<br>Coventry       | State<br>RI         |
|  |             |   | Zip<br>02816           |                     |
| 4. Business Phone No.<br>(401) 823-7290  |             | 5. State of Incorporation<br>Rhode Island                           |                        |                     |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>RETAIL STORE SELLING SWIMMING POOLS, PORTABLE SPAS AND RELATED ACCESSORIES  |             |   |                        |                     |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |   |                        |                     |
| President Name<br>Kenneth J. Stockley  |             | Vice President Name<br>Annette M. Stockley                          |                        |                     |
| Street Address<br>19 Rosemary Lane   |             | Street Address<br>19 Rosemary Lane                                  |                        |                     |
| City<br>Greenville   | State<br>RI | Zip<br>02828  | City<br>Greenville     | State<br>RI         |
| Secretary Name<br>Annette M. Stockley  |             | Treasurer Name<br>Kenneth J. Stockley                               |                        |                     |
| Street Address<br>19 Rosemary Lane   |             | Street Address<br>19 Rosemary Lane                                  |                        |                     |
| City<br>Greenville   | State<br>RI | Zip<br>02828  | City<br>Greenville     | State<br>RI         |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |   |                        |                     |
| Director Name<br>Kenneth J. Stockley   |             | Director Name   |                        |                     |
| Street Address<br>19 Rosemary Lane   |             | Street Address  |                        |                     |
| City<br>Greenville   | State<br>RI | Zip<br>02828  | City                   | State               |
| Director Name  |             | Director Name   |                        |                     |
| Street Address   |             | Street Address  |                        |                     |
| City   | State       | Zip   | City                   | State               |
| 9. SHARES AUTHORIZED   |             | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                        |                     |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. |             | ISSUED SHARES — THIS SECTION MUST BE COMPLETED                      |                        |                     |
|  |             | Number of Shares<br>200   | Class/Series<br>Common | Par Value<br>No Par |
|  |             |   |                        |                     |

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**FILED**

File Date FEB 07 2011

Check No. By MJC

By: 18653

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature [Signature] Date 2/3/11

Kenneth J. Stockley

Print or Type Name

President

Title